

# Review of a Penalty Infringement Notice or Official Warning Application

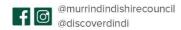
To apply for an internal review of a penalty infringement notice or official warning issued by the Murrindindi Shire Council.

| Applicant details   |      |                      |          |                        |  |
|---|------|----------------------|----------|------------------------|--|
| Who is applying:  |      |                      |          |                        |  |
| <ul> <li>□ Person named on the Penalty Infringement Notice/Offic</li> <li>□ Other person with Consent (You must also complete the this page)</li> </ul>   |      | _                    | nal Revi | ew' on reverse side of |  |
| ☐ Authorised company representative   |      |                      |          |                        |  |
| Given name:   |      |                      |          |                        |  |
| Surname:  |      |                      |          |                        |  |
| Organisation name:  |      |                      | ABN:     |                        |  |
| Street address:   |      |                      |          |                        |  |
| Town/suburb:  |      | State:               |          | Postcode:              |  |
| Postal address (if different to above):   |      |                      |          |                        |  |
| Mobile number:  | Othe | ther contact number: |          |                        |  |
| Email:  |      |                      |          |                        |  |
| Infringement details  |      |                      |          |                        |  |
| Penalty Infringement Notice number:   |      |                      |          |                        |  |
| Official Warning number:  |      |                      |          |                        |  |
| Grounds for review (descriptions are located on page 3)   |      |                      |          |                        |  |
| Only one internal review may be submitted per Infringement when an internal review has been granted on the ground of Exceptional Circumstances  Contrary to Law  Mistaken Identity  Person Unaware of Fine  Penalty Reminder Notice Fee Waiver Request  Special Circumstances |      |                      |          | , unless applying      |  |

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**MURRINDINDI SHIRE COUNCIL** 

ABN 83 600 647 004



| Attachments   |  |  |  |  |
|---|--|--|--|--|
| ☐ I have attached an explanation of my circumstances and ground(s) in support of my application   |  |  |  |  |
| Further information   |  |  |  |  |
| If you require any assistance completing this form please contact Council on (03) 5772 0333 or via email at <a href="mailto:customer@murrindindi.vic.gov.au">customer@murrindindi.vic.gov.au</a>  |  |  |  |  |
| Declaration details   |  |  |  |  |
| I understand that this is the only Internal Review for this Infringement that I am able to submit pursuant to s.22(2) of the Infringements Act 2006.  |  |  |  |  |
| I declare that the information that I have supplied in this form, and any attachments to this form, are true and correct to the best of my knowledge.   |  |  |  |  |
| I understand that by making a false or misleading statement in support of this claim, I may be prosecuted.  |  |  |  |  |
| Signature of Applicant: Date:   |  |  |  |  |
| Privacy statement   |  |  |  |  |
| The personal information requested in this form is being collected by Murrindindi Shire Council for the purpose of this application. We will not disclose your personal information without your consent, except where required to do so by law. To view our privacy policy, visit our website at <a href="https://www.murrindindi.vic.gov.au/privacy">www.murrindindi.vic.gov.au/privacy</a> |  |  |  |  |
| ☐ If you do not wish for us to update our records with the information provided, please check this box.   |  |  |  |  |
| Consent for internal review (To be completed if another person is acting on your behalf)  |  |  |  |  |
| I (person named in the infringement)  |  |  |  |  |
| Of (address of person named on the infringement)  |  |  |  |  |
|   |  |  |  |  |
|   | , give my consent to   |  |  |  |
| (name of person making the application on your behalf)  |  |  |  |  |
| For an Internal Review o  | n my behalf to Penalty Infringement Notice/Official Warning number |  |  |  |
| Signature of person named on the Infringement/Warning:  | Date:  |  |  |  |
| Signature of other person with Consent:   | Date:  |  |  |  |

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#### Description of relevant grounds for internal review appeal

#### **Exceptional Circumstances**

Please provide details of the exceptional circumstances (where you have committed the offence due to unforeseen or unpreventable circumstances, e.g. medical emergencies).

#### Mistaken Identity

Please provide an explanation of why you rely on the ground of mistake of identity (including evidence e.g. copy of your driver's licence, in support).

#### **Person Unaware of Fine**

An application made on the ground of 'person unaware' must:

- be made within 14 days of you becoming aware of the infringement notice (You may evidence the date that you became aware of the infringement notice by executing a statutory declaration)
- state the grounds on which the decision should be reviewed, and
- provide your current address for service.

# **Penalty Reminder Notice Fee Waiver Request**

Please provide the reason(s) why you believe the Penalty Reminder Notice Fee should be waived. Note: The original penalty amount is still applicable under this request.

#### **Special Circumstances**

#### Special circumstances includes:

a mental or intellectual disability, disorder, disease or illness

a serious addiction to drugs, alcohol or volatile substance

homelessness, or

family violence within the meaning of the Family Violence Protection Act 2008.

You must provide evidence (e.g. letter, report, statement) from one of the following parties to support your application:

a case worker, case manager or social worker

a general practitioner, psychiatrist or psychologist, or

an accredited drug treatment agency.

Evidence (e.g. letter, statement or a report) from practitioner or case worker should include the following information:

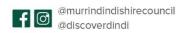
- (a) the practitioner/case worker's qualification and relationship with you, including the period of engagement
- (b) the nature, severity and duration of your condition or your circumstances:
  - whether you were suffering from the relevant condition or circumstances at the time the offence was committed, and
  - whether, in the opinion of the practitioner/case worker, it is more likely than not that your condition/ circumstances resulted in your inability to understand or control the conduct constituting the offence.
- (c) the practitioner or agency report must show that because of your condition/circumstances you could not understand or control your conduct constituting the offence.

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customer@murrindindi.vic.gov.au www.murrindindi.vic.gov.au (03) 5772 0333 PO Box 138 Alexandra VIC 3714

# VISIT US

Alexandra: 28 Perkins Street Kinglake: 19 Whittlesea-Kinglake Road

Yea: 15 The Semi Circle

Mobile Library and Customer Service: visit our website for locations and times